

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Priorities USA Action		FEC IDENTIFICATION NUMBER ▼ C C00495861	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Eroyn Franklin		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 06 / 2016	
Mailing Address 552 N 68th St		Amount 35000.00	
City Seattle	State WA	Zip Code 98103-5318	Transaction ID : VNTYH9TEZV2
Purpose of Expenditure Digital Production (Estimate)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 06 / 2016
Name of Federal Candidate DONALD J TRUMP		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: 00
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Precision Network LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 06 / 2016	
Mailing Address 1140 Connecticut Ave NW Ste 800		Amount 250000.00	
City Washington	State DC	Zip Code 20036-4010	Transaction ID : VNTYH9TE4H7
Purpose of Expenditure Digital Ad Buy (Estimate)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 06 / 2016
Name of Federal Candidate DONALD J TRUMP		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: 00
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	285000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Greg Speed

[Electronically Filed]

Date

MM / DD / YYYY
09 / 08 / 2016

Signature

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Ralston Lapp Media, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 06 / 2016	
Mailing Address 1054 31st St NW Ste 430		Amount 20072.62	
City Washington	State DC	Zip Code 20007-6042	Transaction ID : VNTYH9TES74
Purpose of Expenditure Video Production (Estimate)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 06 / 2016
Name of Federal Candidate DONALD J TRUMP		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: 00
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Shorr Johnson Magnus		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 06 / 2016	
Mailing Address 100 N 20th St Ste 201		Amount 53510.98	
City Philadelphia	State PA	Zip Code 19103-1454	Transaction ID : VNTYH9TEZZ4
Purpose of Expenditure Video Production (Estimate)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 06 / 2016
Name of Federal Candidate DONALD J TRUMP		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: 00
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	73583.60
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Full Name of Payee Targeted Platform Media LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 06 / 2016	
Mailing Address 1291 Hollywood Ave		Amount 3681591.00	
City Annapolis	State MD	Zip Code 21403-4909	Transaction ID : VNTYH9TE2J1
Purpose of Expenditure TV Ad Buy (Estimate)	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 09 / 06 / 2016	
Name of Federal Candidate DONALD J TRUMP		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: 00	
Calendar Year-To-Date Per Election for Office Sought 51344693.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/Type		
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	3681591.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	4040174.60

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